PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

<ul> <li>Complete items 1, 2, and 3. Also item 4 if Restricted Delivery is des</li> <li>Print your name and address on the so that we can return the card to select the solution of the back of the or on the front if space permits.</li> </ul>	ired. ne reverse	A. Signature  B. Received by (Pr  Brx & V	SECTION ON DELIV	Agent  Addressee  Date of Delivery
Article Addressed to:  Johnnie Dumas		D. Is delivery addres	ss different from item 1 ivery address below:	1?
Kilby Correctional Fac PO Box 150 Mt. Meigs, AL 36057	ility		30	
C40 05-916	a /2 a	3. Sepuce Type Certified Mail Registered Insured Mail	☐ Express Mail ☐ Return Receipt ☐ C.O.D.	for Merchandise
2. Article Number	7/29	4. Restricted Deliver	y? (Extra Fee)	☐ Yes
(Transfer from service label) PS Form 3811, February 2004	7005 11	20 0007 30	17 3621	

SENDER: COMPLETE THIS SECTION  Case 2.05  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  Captain Barrett  Kilby Correctional Facility  PO Box 150  Mt. Meigs, AL 36057	A. Signature  X. B. L. Agent  B. Received by (Printed Name)  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
$\frac{CQD}{OS-9/6} = \frac{9/29}{9/29}$ 2. Article Number	3. Seprice Type  Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee)
(Transfer from service label)	L160 0001 3017 4888

SENDER: COMPLETE THIS SECTION  Case 2  Complete items 1, 2, and 3. Also contend 4 if Restricted Delivery is desired.  Print your name and address on the so that we can return the card to your attach this card to the back of the nor on the front if space permits.	A. Signature  A. Signature  X. B. Verror Addressee  B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address stiff
CO I Morgan	ii 1ES, enter delivery address below:
Kilby Correctional F PO Box 150 Mt. Meigs, AL 3605	Facility
	3. Service Type
C40 05-916	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
2. Article Number	1/29 4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label)	7005 1160 0001 3017 3591
PS Form 3811, February 2004	Domestic Return Receipt
	102595-02-M-1540

A. Signature  X. B. Received by (Printed Name)  C. Daje of Delivery
D. Is delivery address different 9/30/05
If YES, enter delivery address below:
,2.
3. Service Type  Certified Mail Registered Insured Mail C.O.D.  Express Mail Receipt for Merchandise C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes
□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

SENDER: COMPLETE THIS SECTION  Case Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  X. Bury  Agent  B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address different
Carl Clay Kilby Correctional Facility PO Box 150 Mt. Meigs, AL 36057	If YES, enter delivery address below:
C 4 0 05-916 9/29	3. Service Type  Certified Mail Registered Insured Mail C.O.D.  Express Mail Return Receipt for Merchandise C.O.D.  Restricted Delivery? (Extra Fee)
(Transfer from service label) 7005	
PS Form 3811, February 2004 Domestic Return	1160 0001 3017 3607 n Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	THOUSE CHON ON DETWERV
<ul> <li>Complete items 1, 2, and 3. Also contem 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the so that we can return the card to you.</li> <li>Attach this card to the back of the mor on the front if space permits.</li> </ul>	reverse X Bruce Verning Address
Article Addressed to:	D. Is delivery address different from item 12
Doris Vickers Kilby Correctional Faci PO Box 150 Mt. Meigs, AL 36057	If YES, enter delivery address below: □ No  1ity
CQO 05-916	3. Service Type  Certified Mail Registered Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee)  Service Type Return Receipt for Merchandise C.O.D.
2. Article Number	Yes   Yes
(Transfer from service label)	7005 1160 0001 3017 3638
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M 1540

102595-02-M-1540